## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10627720

| CLAIMS AS FILED - PA<br>(Column 1)  |  |   |              |                               | (Column 2)           |                  |          | SMALL ENTITY TYPE   |                        |    | OTHER THAN OR SMALL ENTITY |                                       |
|---|--|---|--------------|-------------------------------|----------------------|------------------|----------|---------------------|------------------------|----|----------------------------|---------------------------------------|
| TOTAL CLAIMS  |  |   |              |                               |                      |                  |          | RATE                | FEE                    |    | RATE                       | FEE                                   |
| FOR   |  |   | NUMBER FILED |                               | NUMBER EXTRA         |                  |          | BASIC FEE           | 375.00                 | OR | BASIC FEE                  | 750.00                                |
| TOTAL CHARGEABLE CLAIMS   |  |   | minus 20=    |                               | *                    |                  |          | X\$ 9=              |                        | OR | X\$18=                     |                                       |
| INDEPENDENT CLAIMS  |  |   | minus 3 =    |                               | *                    |                  |          | X42=                |                        | OR | X84=                       |                                       |
| MULTIPLE DEPENDENT CLAIM P  |  |   | RESENT       |                               |                      |                  |          | +140=               |                        | OR | +280=                      |                                       |
| * If  | the difference                                   | in column 1 is                            | less than ze | ro, entei                     | "0" in column 2      |                  | L        | TOTAL               |                        | OR | TOTAL                      |                                       |
|   | CI   | LAIMS AS A<br>(Column 1)                  | MENDED       | - PAR<br>(Colur               |                      |                  |          | SMALL ENTITY        |                        | OR | OTHER THAN<br>SMALL ENTITY |                                       |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID | IEST<br>BER<br>DUSLY | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE                |
|   | Total  | *   | Minus        | **                            |                      | =                |          | X\$ 9=              |                        | OR | X\$18=                     |                                       |
|   | Independent                                      | * Minus NTATION OF MULTIPLE DEF           |              | ***                           | E CL AINA            | =                |          | X42=                |                        | OR | X84=                       | •                                     |
| Ш   | FIRST PRESE                                      | NTATION OF MI                             | ULTIPLE DEF  | PENDEN                        | CLAIN                |                  |          | +140=               |                        | OR | +280=                      |                                       |
|   |  |   |              |                               |                      |                  | L        | TOTAL<br>ADDIT, FEE |                        | OR | TOTAL<br>ADDIT. FEE        |                                       |
|   |  | (Column 1)                                |              | (Colu                         |                      | (Column 3)       |          |                     |                        |    |                            |                                       |
| AMENDMENT B   | À  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVI<br>PAID  | BER                  | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE                |
|   | Total  | *   | Minus        | **                            |                      | =                |          | X\$ 9=              |                        | OR | X\$18=                     |                                       |
|   | Independent                                      | *<br>NTATION OF M                         | Minus        | ***                           | CL AIM               | =                |          | X42=                |                        | OR | X84=                       |                                       |
|   | THOTTHESE  | IVIAIIOIV OI IM                           | OETH EE DEI  | LINDLIN                       | OLANIVI              |                  |          | +140=               |                        | OR | +280=                      |                                       |
|   |  |   |              |                               |                      |                  | <b>L</b> | TOTAL<br>ADDIT, FEE |                        | OR | TOTAL<br>ADDIT. FEE        |                                       |
|   |  | (Column 1)                                |              | (Colu                         |                      | (Column 3)       |          |                     |                        |    |                            |                                       |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              |                               |                      | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE | C  | RATE                       | ADDI-<br>TIONAL<br>FEE                |
|   | Total  | *   | Minus        | **                            |                      | =                |          | X\$ 9=              | ·                      | OR | X\$18=                     |                                       |
|   | Independent                                      | *   | Minus        | ***                           | T CL AIM             | =                |          | X42=                |                        | OR | X84=                       |                                       |
| <u> </u>  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM . |   |              |                               |                      |                  |          | +140=               |                        | OR | +280=                      |                                       |
|   |  | mn 1 is less than t                       |              |                               |                      |                  | . L      | TOTAL               | <u>i</u>               | OR | TOTAL                      |                                       |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |              |                               |                      |                  |          |                     |                        |    |                            | · · · · · · · · · · · · · · · · · · · |